

POSITION	INITIALS	C.	DATE
<b>FEE DETERMINATION</b>	<i>W/K</i>		<i>2-20-01</i>
<b>O.I.P.E. CLASSIFIER</b>		<i>49</i>	<i>3/7/01</i>
<b>FORMALITY REVIEW</b>	<i>H.J</i>	<i>1079</i>	<i>05/22/01</i>
<b>RESPONSE FORMALITY REVIEW</b>			

## INDEX OF CLAIMS

Rejected      N ..... Non-elected  
 Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 Restricted      0 ..... Objected

Claim	Final	Original	Date
1	1	1	5/22/01
2	1	1	5/22/01
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If more than 150 claims or 10 actions  
 staple additional sheet here

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